

Guide for people getting services from Washington State **Medical Assistance**

November 2001



**If you need help or information,
where you should call depends
on what you need.**

Page 1 tells when to call the
Medical Assistance helpline and
gives the number.

Page 2 tells when to call your
DSHS office (CSO, HCS or MEDS).

Page 3 tells you where to find the
numbers for CSO, HCS and MEDS.

We can give you the information in this Guide in other formats

If it is hard for you to read this booklet, please call us at 1-800-562-3022 to ask for another format such as large print. The TTY/TDD line is 1-800-848-5429 (only for people who have difficulties with hearing or speech; your phone must be equipped to use this line). You can also get information about Medical Assistance by visiting the following website. Your public library may have internet access you can use for free.



<http://maa.dshs.wa.gov/>

This Guide has been translated into other languages:



1-800-562-3022

본 책자를 한국어로 입수하시려면 1-800-562-3022 로 연락하십시오.

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Muốn có tập sách này bằng Tiếng Việt, xin gọi số 1-800-562-3022.

Para obtener una copia de este folleto en español llame al 1-800-562-3022.

ដើម្បីបានទទួលសៀវភៅតូចនេះជាភាសាខ្មែរមួយច្បាប់, សូមទូរស័ព្ទទៅ 1-800-562-3022 ។

Звоните по телефону 1-800-562-3022 для получения этого буклета на русском.

如需中文版的手冊，請電：1-800-562-3022。

DSHS Medical Assistance does not discriminate

Discrimination is prohibited in all programs and activities. No one shall be excluded on the basis of race, color, national origin, sex, age, religion, creed or disability.

Is this Guide for you?

Yes This Guide is for you if you are getting Medical Assistance from the State of Washington and you are *not* in a Healthy Options managed care plan. This Guide is for you if you can get your medical care from any doctor or hospital that will take your medical ID card. This means that when you show your medical ID card, they will give you medical care and send the bill to Medical Assistance.

This Guide explains some things you need to know in order to get care using Medical Assistance. The Table of Contents starts on the next page. It will help you find the information you need.

Turn page for the Table of Contents >>>

No This Guide is *not* for you if you are in a Healthy Options managed care plan (which means that there are certain doctors and hospitals you have to use). Healthy Options is a Medical Assistance managed care program. People in Healthy Options get their care through one of the Healthy Options health plans, and must use the doctors and hospitals that are with the plan.

When you first join Healthy Options, you are not in a health plan right away because it takes a little while to get signed up for a plan. Until you are in your plan, the information in this Guide applies to you. But once you are in your plan, you don't need this Guide because your plan will send you information about your benefits and how to get the care you need.

??? If you have questions about this Guide or about whether you are in a Healthy Options health plan, please call the Medical Assistance helpline. The number to call is on page 1 of this Guide.

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Medical Assistance helpline number

Where you should call depends on what you need. See this page and the next page for which number to call in different situations.

Medical Assistance helpline



1-800-562-3022

TTY/TDD 1-800-848-5429 (only for people who have difficulties with hearing or speech— your phone must be equipped to use this line).

Call Monday through Friday, 7 A.M. to 7 P.M. Calls to these numbers are free, and we'll be glad to help.

When should you call the Medical Assistance helpline?

- Call if you have any questions about the information in this guide.
- Call if your medical ID card does not arrive when it should.
- Call if you need an interpreter for a medical appointment.
- Call if you need help with transportation to a medical appointment.
- Call if you get billed for medical services that you think are covered by your Medical Assistance program.
- Call if you are having problems getting the care you need. Also, call if you are unhappy with the care you are getting and need some help in handling the problem.
- Call if you're not sure where to call to get the help or information you need.

Contacting your DSHS office

Your DSHS office (CSO, HCS, or MEDS)

DSHS stands for the Department of Social and Health Services. DSHS is the state government agency that handles Medical Assistance. DSHS also helps with cash grants, childcare, foster care, food assistance, and other services. There are several types of DSHS offices where people sign up for Medical Assistance. Which office you use depends on your situation:

- Most people use a **CSO** (CSO stands for Community Services Office). CSOs help families with medical services, food stamps, cash grants, and childcare.
- People who are in a nursing home or getting services from the Community Options Program (COPES), use an **HCS** office (HCS stands for Home and Community Services).
- Some people get signed up by telephone, mail, or internet through **MEDS** (MEDS stands for Medical Eligibility Determination Services). MEDS helps pregnant women on Basic Health, children, and foster children who need medical services but *don't* need any of the other services offered by DSHS.

When should you call your DSHS office?

Call the DSHS office you use (either your CSO, HCS or MEDS office) for the following things only:

- To fix mistakes on your medical ID card
- To report changes in your address or phone number, or other new information about you and your family

For all other things, call the Medical Assistance helpline (*see page 1*).

Fill in your own information for the DSHS office you use. If you are unsure which DSHS office you use, call the Medical Assistance helpline at 1-800-562-3022.



If you use a CSO office, fill in this part:

CSO phone: _____ (see pages 20–21 for CSO phone numbers)

Name of your case manager: _____

Case manager's phone: _____

Your case number on your medical ID card: _____
(the picture on page 5 of this Guide shows how to find this number on your ID card)



If you use a HCS office, fill in this part:

HCS phone: _____ (see page 22 for HCS phone numbers)

Name of your case manager: _____

Case manager's phone: _____

Your case number on your medical ID card: _____
(the picture on page 5 of this Guide shows how to find this number on your ID card)



If you use the MEDS office, fill in this part:

MEDS Phone 1-800-204-6429

Name of your caseworker: _____

Caseworker's phone: _____

Your case number on your medical ID card: _____
(the picture on page 5 of this Guide shows how to find this number on your ID card)

About your **medical ID card**

You should have already received your medical ID card in the mail. If you did not, please call us at the Medical Assistance helpline—see page 1 of this Guide for the number to call.

Why do you need a medical ID card?

Your medical ID card proves that you are on Medical Assistance. It tells your doctors and other medical providers what medical services you can get, and it tells them that these services will be paid for by DSHS Medical Assistance. You will need to show your card every time you get medical care or services and when you get prescription medicines.

Carry your medical ID card with you all the time

Since your medical ID card lets providers know what medical services you can get, it's a good idea to keep this card with you at all times. Then you can be sure you have it when you need medical care or need to get a prescription at the pharmacy. But if you have an emergency, don't worry about your medical ID card—go to the nearest emergency room for help. We tell you more about emergencies on page 12 of this Guide.

You will get a new medical ID card each month

Your card is good for a one-month period. As long as you are receiving Medical Assistance, we mail you a new green and white medical ID card every month. This card comes during the first week of every month. It lists the people in your family or household who can get medical services through Medical Assistance—no one else may use it.

What if you get more than one medical ID card?

Most people get only one medical ID card each month that lists all family members who have Medical Assistance. But you might get more than one card, with different family members listed on each one. This can happen if family members are on different Medical Assistance programs, or live at different addresses. As long as family members have their names listed on a medical ID card, they can get services.

Keep your old medical ID cards

When you get a new card, put your old card away in a safe place. You should save your old medical ID cards because you might need them later on if there's a question about a bill or your coverage.

What information is on your medical ID card?


All family members who can use this card are listed here. If names or birthdays are wrong, call your DSHS office (*see pages 2–3*).

If you have other medical insurance, this information is shown here.

Your card is good for these dates. If you don't get your new card sometime during the first week in the month, call your DSHS office right away (*see pages 2–3*).

Please read the back of this card.

P.O. BOX 45531
OLYMPIA, WA 98504-5531

 **MEDICAL IDENTIFICATION CARD**
This Card Valid From: 10-01-01
To: 10-31-01 9 27 01

PATIENT IDENTIFICATION CODE (PIC)				MEDICAL COVERAGE INFORMATION							
Initials	Birthdate	Last Name	TB	Insurance	Medicare	HMO	Detox	Restriction	Hospice	CO Clerk	Other
JD RC	010171 121296	DOE DOE	A A								

JANE D. DOE
114 MAIN STREET, APT. 56
VANCOUVER, WA 98685

CNP
076 007308084
R000117347

SHOW TO MEDICAL PROVIDER AT TIME OF EACH SERVICE
DSHS 13-030(X)ACES(04/95)

NOT TRANSFERABLE
SIGNATURE (Not Valid Unless Signed)

Program Name

If your address changes, call your DSHS office right away (*see pages 2–3*).

The initials here show which Medical Assistance program you are in. In this example of a medical ID card, the program is "CNP." Pages 7–11 tell about the Medical Assistance programs, including CNP.

Case Number

This is your case number. It's the number that begins with "00." We ask for this whenever you call us. There is a place on page 3 to write your case number for easy reference when you call.

What if there are mistakes on your medical ID card?

Check your card carefully every month to make sure everything on the card is correct. If anything on the card is wrong or needs to be changed, call and tell your DSHS office right away (*see page 2–3*).

What if you lose your medical ID card, or don't get your new one on time?

If you lose your card, call the Medical Assistance helpline (*see page 1*). Also, call right away if you don't get a card in the mail, or don't get your new card on time.

What if you need to get care before you have a medical ID card?

You can get medical care as soon as you get a letter from DSHS that says you have Medical Assistance (*page 2 tells about DSHS*). This letter tells which people in your family are on Medical Assistance and which program you are in. You can use this letter from DSHS instead of your medical ID card to get medical care while you are waiting for your medical ID card to come.

- You can use your letter from DSHS to get medical care for anyone who is listed in the letter, as long as you get the care from doctors and other medical providers that accept Medical Assistance and the care is covered by your program. “Accepting Medical Assistance” means that they will send the bill for your care to Medical Assistance.
- If you have the letter and you need medical care, call the doctor's office and ask if they take patients who are on DSHS Medical Assistance. If they do, Medical Assistance will pay for the services that are included in your program (*see pages 7–11*).
- Since the letter from DSHS proves that you are on Medical Assistance and tells which program you are in, take it with you to the doctor's office. If you don't show them this letter, you may not be able to get the care you need. If you get medical care without showing the letter, you may have to pay for the care yourself.

If you need care right away and you don't have either the letter or your medical ID card, call the Medical Assistance helpline (*see page 1*). But if it's an emergency, don't worry about your medical ID card or letter from DSHS—just go to the nearest emergency room for help.

About the programs and the benefits and services they cover

Medical Assistance has different medical programs, and each one covers different services. You need to know the name of your medical program to know what services are paid for by DSHS Medical Assistance.

How do you know which medical program you are in?

The medical ID card you get each month shows which program you are in. The program is shown on the lower right-hand corner of the card (*see page 5*). Here are the programs:

How the program name appears on an ID card:	What we call this program in this Guide:	The full name of this program is:
CNP	CNP	Categorically Needy Program
LCP-MNP	MNP	Medically Needy Program
GA-U– No out-of-state care	GA	General Assistance
Emergency Hospital & Ambulance Only (<i>or</i> MIP-EMER Hospital Only—No out-of-state care)	MIP	Medically Indigent Program
Family planning only	Family planning only	Family planning only

*Note: If your medical ID card has a program name with additional words after it or a program name that's not listed here, please call the Medical Assistance helpline (*see page 1*).*

What services are covered by each medical program?

The pages that follow list medical services that are generally covered by each program (there are some limitations on some of the services listed). If you have any questions or want more details about what is covered, please call the Medical Assistance helpline (*see page 1*).

CNP WHAT BENEFITS AND SERVICES DOES IT COVER?

If you are in this program, your medical ID card will have “**CNP**” printed on it. This stands for “Categorically Needy Program.” The main types of services covered by CNP are listed below. There are limitations on some of these services. Also, CNP may cover services that are not listed here. For more information about what CNP covers, call the Medical Assistance helpline.

- Ambulance
- Children’s immunizations (shots)
- Community Mental Health Centers
- Dental *(for more about this, see page 15)*
- Dentures
- Diabetes education *(for more about this, see page 17)*
- Doctors/Providers
- Emergency room
- EPSDT (checkups & preventive care for children & teens under 21)
(for more about this, see page 15)
- Eyeglasses and eye exams *(for more about this, see page 16)*
- Family planning services for men, women, and teens *(for more about this, see page 16)*
- Hearing exams and hearing aids
- Home health services
- Hospice
- Hospital
- Interpreter services for medical care *(for more about this, see page 13)*
- Lab services
- Medical equipment and supplies *(for more about this, see page 17)*
- Nursing facility services
- Oxygen/Respiratory therapy
- Physical medicine & rehabilitation
- Physical therapy, occupational therapy, speech therapy
- Podiatry (feet)
- Prescriptions
- Psychiatric services
- Services for pregnant women during and after pregnancy, including maternity case management and support services *(for more about this, see page 16)*
- Substance abuse services
- Surgery
- Transportation
- Women’s care (obstetrics/gynecology)
- X-rays

MNP WHAT BENEFITS AND SERVICES DOES IT COVER?

If you are in this program, your medical ID card will have “**LCP-MNP**” printed on it. “MNP” stands for “Medically Needy Program.” MNP is for people who have more resources than the CNP program allows, and are in one or more of the following groups: people who are aged; are blind; have disabilities; are pregnant; are children; are refugees. The main types of services covered by MNP are listed below. There are limitations on some of these services. Also, MNP may cover services that are not listed here. For more information about what MNP covers, call the Medical Assistance helpline.

- Ambulance
- Community Mental Health Centers
- Dental *(for more about this, see page 15)*
- Dentures
- Diabetes education *(for more about this, see page 17)*
- Doctors/Providers
- Emergency room
- EPSDT (checkups & preventive care for children & teens under 21)
(for more about this, see page 15)
- Eyeglasses and eye exams *(for more about this, see page 16)*
- Family planning services for men, women, and teens *(for more about this, see page 16)*
- Home health services (limited)
- Hospice
- Hospital
- Interpreter services for medical care *(for more about this, see page 13)*
- Lab services
- Medical equipment and supplies *(for more about this, see page 17)*
- Nursing facility services
- Oxygen/Respiratory therapy
- Physical medicine & rehabilitation
- Podiatry (feet)
- Prescriptions
- Psychiatric services
- Services for pregnant women during and after pregnancy, including maternity case management and support services *(for more about this, see page 16)*
- Substance abuse services
- Surgery
- Transportation
- Women’s care (obstetrics/gynecology)
- X-rays

GA WHAT BENEFITS AND SERVICES DOES IT COVER?

If you are in this program, your medical ID card will have “**GA-U – No out-of-state care**” printed on it. “GA” stands for “General Assistance.” This program is for people who are physically or mentally unable to work for more than 90 days. The main types of services covered by GA are listed below. There are limitations on some of these services. Also, GA may cover services that are not listed here. For more information about what GA covers, call the Medical Assistance helpline.

- Ambulance
- Dentures
- Diabetes education (*for more about this, see page 17*)
- Doctors/Providers
- Emergency room
- Eyeglasses and eye exams (*for more about this, see page 16*)
- Family planning services for men, women, and teens (*for more about this, see page 16*)
- Hearing exams and hearing aids (children only)
- Home health services
- Hospital
- Interpreter services for medical care (*for more about this, see page 13*)
- Lab services
- Medical equipment and supplies (*for more about this, see page 17*)
- Nursing facility services
- Physical medicine & rehabilitation
- Physical therapy, occupational therapy, speech therapy
- Podiatry (feet)
- Prescriptions
- Services for pregnant women during and after pregnancy, including maternity case management and support services (*for more about this, see page 16*)
- Surgery
- Transportation
- Women’s care (obstetrics/gynecology)
- X-rays

MIP WHAT BENEFITS AND SERVICES DOES IT COVER?

If you are in this program, your medical ID card will have “**Emergency Hospital & Ambulance Only**” or “**MIP-EMER Hospital Only – No out-of-state care**” printed on it. “MIP” stands for “Medically Indigent Program.” This program is only for emergency services in a hospital or nursing facility. The main types of services covered by MIP are listed below. There are limitations on some of these services. Also, MIP may cover services that are not listed here. For more information about what MIP covers, call the Medical Assistance helpline. The MIP benefits and services listed below are *only* for emergency services in a hospital or nursing facility.

- Ambulance
- Doctors/Providers
- Emergency room
- Hospital
- Lab services
- Medications
- Nursing facility services
- Surgery
- X-rays

Family Planning Only WHAT BENEFITS AND SERVICES DOES IT COVER?

If you are in this program, your medical ID card will have “**Family Planning Only**” printed on it. This program provides ten months of family planning services following a pregnancy. The main types of services covered by Family Planning Only are listed below. There are limitations on some of these services. Also, Family Planning Only may cover services that are not listed here. For more information about what Family Planning Only covers, call the Medical Assistance helpline.

- All birth control methods
- Sterilization
- See “Family planning services for men, women and teens” on page 16 for more details

How to get your medical services

Going to doctors and other providers who take your medical ID card

When you are on Medical Assistance, you need to get your care from doctors and other medical providers who take your medical ID card. This means that when you show them your medical ID card, they will send the bill for your care or services to Medical Assistance instead of to you. Your medical ID card gives the name of the program you're in, which tells your providers what care and services Medical Assistance will pay for. "Providers" are people or organizations that give or "provide" medical care or services or supplies. Providers include doctors, nurses, clinics, dentists, pharmacies, and hospitals.

How do you find a doctor, dentist, or other provider you can use?

Before you use a doctor, dentist, clinic, pharmacy, or other provider, you must find out if they will take your medical ID card and bill Medical Assistance. If you have doctors or other providers you want to use, ask if they will take your medical ID card. You can also call doctors and other providers who are near you to find out if they will take your medical ID card. If you have problems finding providers who will take your medical ID card, call the Medical Assistance helpline (*see page 1*).

What if you have an emergency?

An emergency is when someone has a serious medical problem and needs care right away—**when someone might die or be disabled if they don't get care right away**. Here are some examples of emergencies: broken bones; problems with breathing; chest pains or heart attack; loss of consciousness; convulsions or seizures; poisoning or drug overdose; miscarriage; serious pain or bleeding; serious burns; head or eye injuries; high fever; or rape.

If you have an emergency, call 911 or go to an emergency room. Call your doctor when you go to an emergency room, and go back to your doctor for follow-up care after an emergency room visit.

What if you need an interpreter to help you talk with your doctor or other provider? (Included with CNP, MNP, GA)

You can get medical interpreter services if you are in the CNP, MNP, or GA program. A medical interpreter can help you talk with your doctor if you don't speak English, are blind, are deaf or have problems hearing. If you need a medical interpreter, tell your doctor's office when you make your appointment. The doctor's office will get an interpreter for you. Medical Assistance only pays for professional interpreters that we have approved (we do not pay family members who help interpret).

What if you need help with transportation to medical visits? (Included with CNP, MNP, GA)

Medical Assistance can help you and others listed on your medical ID card with transportation to medical visits if you are in the CNP, MNP, or GA program. We can help you get a bus pass or a ride to and from medical visits. We can also help with volunteer drivers and vans that have wheelchair lifts. Or, if you already have a ride, we can help pay for gas or mileage. If you are in CNP, MNP, or GA, and need help with transportation to your medical visits, call the Medical Assistance helpline (*see page 1*).

Can you get medical services in other states? (Included with CNP, MNP)

In nearly all cases, people who are on Medical Assistance must get their medical care within the state of Washington. There are a few exceptions where Medical Assistance will pay for care that people get in other states:

- 1.** If the program listed on your medical ID card is CNP or MNP, Medical Assistance will pay for **emergency care** you get when you are in another state *only* if you get the emergency care from providers who accept your medical ID card.
- 2.** If the program listed on your medical ID card is CNP or MNP, Medical Assistance will pay for **routine (non-emergency)** care when you are in another state only under the following special conditions: *if* the care you get is something we would normally pay for but is hard to get in Washington, *and* you get approval ahead of time. For more information, call the Medical Assistance helpline (*see page 1*).

3. There's a possible exception just for people who live near the Idaho or Oregon border. In some situations, Medical Assistance may pay for care you get in Idaho or Oregon if you live near the border. For example, this can happen if people who live in your area typically get their care across the border. If you live near the border of another state, call the Medical Assistance helpline (*see page 1*) to talk about your situation.

What if you have other medical insurance?

You can sometimes get Medical Assistance even if you have private health insurance, Medicare, or veteran's benefits. Sometimes Medical Assistance will pay for services that are not paid for by your private insurance. In some cases, Medical Assistance will pay your health insurance premiums. If you have other medical insurance, call the Medical Assistance helpline (*see page 1*) to talk about your situation.

More detail about **some medical services**

The following medical services may have limits or need approval from Medical Assistance. If you have any questions or want details about what is covered, please call the Medical Assistance helpline (see page 1).

Checkups for children and teens – EPSDT (included with CNP, MNP)

People under 21 years old can get EPSDT services if they are in the CNP or MNP program. EPSDT stands for Early and Periodic Screening, Diagnosis, and Treatment. EPSDT includes regular checkups for children and teens to make sure they get the immunizations (vaccinations) and other preventive care they need to catch any health problems at an early stage. If you have children or teenagers who are in the CNP or MNP program, call your doctor or other medical provider right away to make appointments for their EPSDT checkups.

ABCD – a dental care program for babies and young children

ABCD is a dental program for young children (ABCD stands for Access to Baby and Child Dentistry). ABCD has extra preventive dental services for babies and children up to six years old. It is available in some parts of Washington. When your baby's first tooth appears, call your local health department to see if ABCD is in your area. (To find the number for your health department, look in your telephone book under the name of your county.) If ABCD is in your area, its services are available to *all* children under six who live in the area (provided that they are signed up for this program before they are five years old).

Dental care (included with CNP, MNP)

Dental care for people who are in the CNP or MNP program include routine cleaning, x-rays, fillings and extractions. In some counties it can be hard to find dentists. If you are in the CNP or MNP program and need help finding a dentist, call the Medical Assistance helpline for a list of dentists who may take your medical ID card. You can also ask others such as your friends, your doctor, or your local health department for names of dentists in the area who will take your medical ID card. (To find the number for your health department, look in your telephone book under the name of your county.) If you need help with transportation to the dentist, call the Medical Assistance helpline (*see page 1*).

Children with cleft palate or other serious dental problems can receive orthodontic services if Medical Assistance finds that the services are medically necessary. Call the Medical Assistance helpline to find out what orthodontic services might be available for your child.

Eye exams and eyeglasses (included with CNP, MNP, GA)

You can get eye exams and eyeglasses if you are in the CNP, MNP, or GA program. In most cases, Medical Assistance will not pay for contact lenses. Children can get an eye exam every year, and adults can get one every two years. If you have medical problems, you may be able to get exams more often.

To get your eyes checked, find a provider in the telephone book under *Optical–Optometry*. Call and ask if they will take your medical ID card for both your eye exam and new glasses. If they do, ask for an appointment. If you need new glasses, they will order your eyeglasses and bill Medical Assistance.

Family planning services for men, women, and teens

(included with CNP, MNP, GA, Family Planning Only)

All of the programs except MIP offer family planning services for men, women, and teens. These services have counseling to help you with family planning.

- Services for teenage and adult women include an annual exam, pap tests, and sterilization (tubal ligation). Services for teenage and adult men include condoms and sterilization (vasectomy).
- You can get prescriptions and non-prescription (over the counter) birth control from any pharmacy that will take your medical ID card.
- To find out where to get family planning services, call the Family Planning Hotline at 1-800-770-4334 (calls to this number are free). If you have concerns about being pregnant, call the Emergency Contraception Hotline at 1-888-NOT-2-LATE (1-888-668-2528; calls to this number are free).

Services for women who are pregnant (services during and after pregnancy)

(included with CNP, MNP, GA)

You can get medical services while you are pregnant and for two months after your pregnancy ends if you are in the CNP, MNP, or GA program. This includes First Steps Maternity Support Services. First Steps offers visits from a nurse, a social

worker, and a nutritionist. These visits help you get ready for your baby and can help you with advice and counseling for two months after you give birth.

In addition to these services for you, your baby can get at least one full year of Medical Assistance (even if you are not on Medical Assistance yourself). To find out how to get First Steps services, talk with the First Steps social worker in your local CSO or call Healthy Mothers Healthy Babies at 1-800-322-2588.

Diabetes education (included with CNP, MNP, GA)

You can get up to six hours of diabetic education each year if you are in the CNP, MNP, or GA program. This diabetic education must be from a certified diabetes educator who is approved by the State Department of Health.

Medical equipment and supplies (included with CNP, MNP, GA)

You can get many types of medical equipment and supplies if you are in the CNP, MNP or GA program. Some examples of equipment are wheelchairs, hospital beds, and bathroom equipment. Some examples of supplies are alcohol wipes, gauze, and diapers.

You will need a prescription from your doctor or other medical provider to get the medical supplies and equipment that are covered by CNP, MNP or GA. When you show the prescription, the pharmacy or medical equipment store will send the bill to Medical Assistance (they may need to get permission from Medical Assistance before ordering some types of medical equipment).

Remember, you don't need a prescription to get over-the-counter birth control—you can get it just by showing your medical ID card.

About your rights and responsibilities

What are your rights?

- **Getting care.** You have the right to get the care that is covered by your Medical Assistance program in a timely way. You have the right to get an opinion from another doctor if you are not sure about your doctor's treatment. You have the right to refuse treatment and be told what may happen if you do.
- **Being treated with dignity, respect, and fairness.** You have the right to receive care without discrimination of any kind. You can get help with language, communication, or physical barriers you may face. This includes having written notices or information translated into the language you read, and getting help from a medical interpreter if you need it because you don't speak English or have difficulties with hearing or speaking. It also includes getting help with transportation or medical appointments if you need it.
- **Making complaints.** You have the right to file a complaint or ask for a Fair Hearing at any time and get a timely answer (*see page 19 about how to ask for a Fair Hearing*). You will not be discriminated against because you have complained.

What are your responsibilities?

- **Help your doctor give you the care you need.** You must always bring your medical ID card to all appointments and you must always tell the provider that you are a Medical Assistance client. Help the doctor get copies of your previous medical records. Ask questions about anything you don't understand. Call your doctor when you go to an emergency room, and go back to your doctor for follow-up care after an emergency room visit.
- **Please be courteous about your appointments.** Be sure to call the doctor's office if you will miss an appointment, or will be late, so that other patients can use the time that was reserved for you.
- **Help keep your records up to date.** Let your doctor know if you have other medical insurance besides Medical Assistance. Call your DSHS office if you move or your family situation changes (*see pages 2–3*).
- **If you have problems:** Let your doctor or Medical Assistance know if you are unhappy with the care you are getting (*see page 19*).

If you have **problems or complaints**

What if you have a problem or want to make a complaint?

If you have a problem with your medical care or services—such as problems about being billed, not getting services, or being treated unfairly—there are several things you can do. If possible, start by talking with your doctor or other medical provider about the problem you are having. If you can't talk with your medical provider, or the problem wasn't fixed by talking with your provider, then call the Medical Assistance helpline and we'll help you (*see page 1*).

Important notice about your rights

If Medical Assistance Administration (MAA) denies, ends, delays, or limits services that are not under managed care, we must notify you at least 10 days before that happens.

- How must MAA let you know? We must mail you a letter—a notice—that clearly tells you about the change.
- What can you do if you don't agree with MAA's action? You can question the change by calling: 1-800-562-3022 (TDD/TTY only 1-800-848-5429).

If that doesn't work, you can ask for a Fair Hearing (see below on how to ask for a Fair Hearing). You must do this within 90 days of the letter telling you about the change. In most cases, you can keep the service until the Fair Hearing decision.

How to ask for a Fair Hearing

You have a right to ask for a Fair Hearing when MAA denies, ends, delays or limits your medical care. Here are ways to ask for a Fair Hearing:

- You can talk with the Fair Hearing Coordinator at the DSHS office in your area—your CSO, HCS, or MEDS office (*page 2 tells about DSHS offices*).
- You can contact the state Office of Administrative Hearings by phone or mail. Call 1-800-583-8271 or send a letter to the Office of Administrative Hearings, Post Office Box 42489, Olympia, Washington 98504-2489.

CSO, HCS, MEDS telephone numbers

Telephone numbers and website address for CSO offices



CSO

Most people get signed up for Medical Assistance at a CSO. CSO stands for Community Services Office. CSOs help families with medical services, food stamps, cash grants, and child care. You can get information about CSOs from the website listed below. Your public library may have internet access you can use for free.



<https://www2.wa.gov/dshs/onlinecso/findservice.asp>

Just type in your zipcode and it will give you the name, address, phone number, and other information about the CSO that is closest to you.

Here is a list of CSO phone numbers to help you find the one in your area:

Aberdeen CSO	1-800-548-2353	Kelso CSO	1-800-244-3170
Alderwood CSO (Lynnwood)	425-673-3000	Kennewick CSO	509-735-7119
Auburn CSO	1-877-586-5502	King Eastside CSO (Bellevue)	1-800-662-6715
Bellingham CSO	1-800-735-7040	King North CSO (Seattle)	206-789-5200
Belltown CSO (Seattle)	206-956-3353	King South CSO (Kent)	1-800-422-7912
Bremerton CSO	1-800-338-7410	Lake City CSO (Seattle)	206-368-7200
Burien CSO (Seattle)	206-439-5300	Mt. Vernon CSO	360-416-7444
Capitol Hill CSO (Seattle)	206-568-5500	Oak Harbor CSO	1-800-735-7037
Clarkston CSO	1-800-922-3441	Okanogan CSO (Omak)	1-800-479-5553
Chehalis CSO	1-800-442-5118	Olympia CSO	360-725-6600
Everett CSO	425-339-4000	Orchards CSO	1-800-287-1745
Federal Way CSO	253-835-2800	Pasco CSO	1-800-922-3442
Grandview CSO	509-882-9300	Pasco CSO	1-800-922-3442
Grant/Adams CSO (Moses Lake) ..	1-800-245-7737	Pierce North CSO (Tacoma)	1-800-282-9961

CSO phone numbers, *continued*

Pierce South CSO (Tacoma)	253-471-4400	Spokane Valley CSO	1-800-660-4370
Pierce West CSO (Tacoma)	253-983-6700	Sunnyside CSO	509-839-7200
Port Angeles CSO	1-877-280-6222	Toppenish CSO	1-800-228-5032
Puyallup Valley CSO	1-800-323-3561	Tri-County/Colville CSO	1-800-992-7784
Rainier CSO (Seattle)	206-760-2000	Vancouver CSO	360-993-7700
Renton CSO	425-793-5700	Walla Walla CSO	1-800-922-3437
Shelton CSO	1-800-222-8295	Wapato CSO	509-877-8122
Skykomish Valley CSO (Monroe) ..	1-800-735-7039	Wenatchee CSO	1-800-272-8881
Smokey Point CSO (Arlington)	1-800-827-1808	West Seattle CSO	206-923-4800
Spokane Central CSO	509-227-2500	Yakima CSO	509-225-6100
Spokane North CSO	1-877-210-5950	Yakima/Kittitas CSO	509-225-6210
Spokane Southwest CSO	1-800-962-5762		

Telephone numbers for HCS offices



HCS

People who are in nursing homes or who get services from the Community Options Program (COPEs) use an HCS office to get signed up for Medical Assistance. HCS stands for Home and Community Services. HCS offices help people who are elderly or disabled get long-term care or other health-related services.

Find the county you live in listed below. Then call the regional office number listed next to it and tell them which city and county you live in. They will give you the phone number for your nearest HCS office.

Adams county	1-800-459-0421	Lincoln county	1-800-459-0421
Asotin county	1-800-822-2097	Mason county	1-800-462-4957
Benton county	1-800-822-2097	Okanogan county	1-800-459-0421
Chelan county	1-800-459-0421	Pacific county	1-800-462-4957
Clallam county	1-800-462-4957	Pend Oreille county	1-800-459-0421
Clark county	1-800-462-4957	Pierce county	1-800-442-5129
Columbia county	1-800-822-2097	San Juan county	1-800-487-0416
Cowlitz county	1-800-462-4957	Skagit county	1-800-487-0416
Douglas county	1-800-459-0421	Skamania county	1-800-462-4957
Ferry county	1-800-459-0421	Snohomish county	1-800-451-0421
Franklin county	1-800-822-2097	Spokane county	1-800-459-0421
Garfield county	1-800-822-2097	Stevens county	1-800-459-0421
Grant county	1-800-459-0421	Thurston county	1-800-462-4957
Grays Harbor county	1-800-462-4957	Wahkiakum county	1-800-462-4957
Island county	1-800-487-0416	Walla Walla county	1-800-822-2097
Jefferson county	1-800-462-4957	Whatcom county	1-800-487-0416
King county	1-800-346-9257	Whitman county	1-800-459-0421
Kitsap county	1-800-442-5129	Yakima county	1-800-822-2097
Kittitas county	1-800-822-2097		
Klickitat county	1-800-462-4957		
Lewis county	1-800-462-4957		

Telephone numbers for MEDS



MEDS

Many pregnant women on Basic Health, children, and foster children get signed up for Medical Assistance through MEDS. MEDS stands for Medical Eligibility Determination Services. MEDS helps pregnant women on Basic Health and children who need medical services but don't need any of the other services offered by DSHS, such as food stamps, cash grants, or child care.

To reach MEDS, call: **1-800-204-6429**

Monday through Friday, 8 A.M. to 5 P.M.

TTY/TDD 1-800-204-6430 (only for people who have difficulties with hearing or speech— your phone must be equipped to use this line).

Department of Social & Health Services
Medical Assistance Administration
Division of Client Support
P.O. Box 45536
Olympia, WA 98504-5536



DSHS 22-530(X) (10/01)